

County: Chippewa
 NORTHERN WISC. CTR. FOR DEV. DISABLED
 2820 EAST PARK AVENUE, PO BOX 340
 CHIPPEWA FALLS 54729 Phone: (715) 723-5542
 Operated from 1/1 To 12/31 Days of Operation: 366
 Operate in Conjunction with Hospital? No
 Number of Beds Set Up and Staffed (12/31/00): 218
 Total Licensed Bed Capacity (12/31/00): 338
 Number of Residents on 12/31/00: 189

Facility ID: 9990

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Ownership:
 Highest Level License:
 Operate in Conjunction with CBRF?
 Title 18 (Medicare) Certified?
 Average Daily Census:

State
 FDDs
 No
 No
 198

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/00)				Length of Stay (12/31/00)	
		Primary Diagnosis	%	Age Groups	%		%
Home Health Care	No					Less Than 1 Year	3.7
Supp. Home Care-Personal Care	No					1 - 4 Years	2.1
Supp. Home Care-Household Services	No	Developmental Disabilities	100.0	Under 65	92.6	More Than 4 Years	94.2
Day Services	No	Mental Illness (Org./Psy)	0.0	65 - 74	4.2		
Respite Care	No	Mental Illness (Other)	0.0	75 - 84	3.2		100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	0.0	*****	
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	0.0	Full-Time Equivalent	
Congregate Meals	No	Cancer	0.0			Nursing Staff per 100 Residents	
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/00)	
Other Meals	No	Cardiovascular	0.0	65 & Over	7.4		
Transportation	No	Cerebrovascular	0.0			RNs	6.3
Referral Service	No	Diabetes	0.0	Sex	%	LPNs	13.5
Other Services	Yes	Respiratory	0.0			Nursing Assistants	
Provide Day Programming for		Other Medical Conditions	0.0	Male	60.8	Aides & Orderlies	
Mentally Ill	No			Female	39.2		137.6
Provide Day Programming for			100.0				
Developmentally Disabled	Yes				100.0		

Method of Reimbursement

		Medi care (Title 18)			Medi caid (Title 19)			Other		Private Pay			Managed Care			Percent Of All Residents	
Level of Care	No.	%	Per Diem Rate	No.	%	Per Diem Rate	No.	%	Per Diem Rate	No.	%	Per Diem Rate	No.	%	Per Diem Rate	No.	
Int. Skilled Care	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Skilled Care	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Intermediate	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Limited Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Personal Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Dev. Disabled	---	---	---	189	100.0	\$430.97	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	189	100.0%
Traumatic Brain Inj.	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Ventilator-Dependent	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Total	0	0.0		189	100.0		0	0.0		0	0.0		0	0.0		189	100.0%

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/00				
Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
		Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/No Home Health	0.0	Bathing	6.9	39.7	53.4	189
Private Home/With Home Health	0.0	Dressing	18.0	39.2	42.9	189
Other Nursing Homes	0.0	Transferring	60.8	16.4	22.8	189
Acute Care Hospitals	0.0	Toilet Use	24.3	50.3	25.4	189
Psych. Hosp. -MR/DD Facilities	85.7	Eating	29.6	47.1	23.3	189
Rehabilitation Hospitals	0.0	*****				
Other Locations	14.3	Continence		%	Special Treatments	%
Total Number of Admissions	7	Indwelling Or External Catheter		0.0	Receiving Respiratory Care	10.1
Percent Discharges To:		Occ/Freq. Incontinent of Bladder	59.8		Receiving Tracheostomy Care	0.0
Private Home/No Home Health	0.0	Occ/Freq. Incontinent of Bowel	50.3		Receiving Suctioning	2.1
Private Home/With Home Health	61.3				Receiving Ostomy Care	5.3
Other Nursing Homes	0.0	Mobility			Receiving Tube Feeding	5.3
Acute Care Hospitals	0.0	Physically Restrained	4.2		Receiving Mechanically Altered Diets	85.2
Psych. Hosp. -MR/DD Facilities	3.2				Other Resident Characteristics	
Rehabilitation Hospitals	0.0	Skin Care			Have Advance Directives	6.9
Other Locations	19.4	With Pressure Sores	0.5		Medications	
Deaths	16.1	With Rashes	22.8		Receiving Psychoactive Drugs	67.2
Total Number of Discharges (Including Deaths)	31	*****				

Selected Statistics: This FDD Facility Compared to Similar Facilities & Compared to All Facilities

	This Facility %	FDD Facilities %	FDD Facilities Ratio	All Facilities %	All Facilities Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	58.6	85.5	0.69	84.5	0.69
Current Residents from In-County	4.2	42.1	0.10	77.5	0.05
Admissions from In-County, Still Residing	0.0	19.5	0.00	21.5	0.00
Admissions/Average Daily Census	3.5	16.4	0.22	124.3	0.03
Discharges/Average Daily Census	15.7	19.2	0.81	126.1	0.12
Discharges To Private Residence/Average Daily Census	9.6	9.2	1.05	49.9	0.19
Residents Receiving Skilled Care	0.0	0.0	0.00	83.3	0.00
Residents Aged 65 and Older	7.4	16.2	0.46	87.7	0.08
Title 19 (Medicaid) Funded Residents	100.0	99.5	1.01	69.0	1.45
Private Pay Funded Residents	0.0	0.5	0.00	22.6	0.00
Developmentally Disabled Residents	100.0	99.3	1.01	7.6	13.09
Mentally Ill Residents	0.0	0.5	0.00	33.3	0.00
General Medical Service Residents	0.0	0.2	0.00	18.4	0.00
Impaired ADL (Mean)*	53.0	50.8	1.04	49.4	1.07
Psychological Problems	67.2	45.9	1.46	50.1	1.34
Nursing Care Required (Mean)*	16.4	11.0	1.49	7.2	2.29